

## SUPERIOR COURT OF CALIFORNIA, COUNTY OF BUTTE – HUMAN RESOURCES

ONE COURT STREET, OROVILLE, CALIFORNIA, 95965-3303 TELEPHONE: (530) 532-7013 **A** FACSIMILE: (530) 538-8567

## **APPLICATION FOR EMPLOYMENT**

H.R. USE ONLY
☐ Meets MQ's
☐ Does Not Meet MQ's
☐ Education
☐ Experience
☐ Late/Incomplete
☐ Vet. Pts ☐ 5 ☐ 10
By:Date

				By:Date				
1. Date	. Date 2. Title of Position:							
3. Name:	(First)	(Middle)	(Last)					
4. Mailing Address:	(Number & Street or	· P.O. Box)	(City, State, and ZIP Code)					
5. Telephone Numbers:	(Home)	(Message)	6. Social Security Nur	nber:				
	000 C 00000	* * * * * * * *	0000					
7. Court Employment: Are yo		te County Superior Court?	8	☐ Yes ☐ No				
If yes, in what capacity		you in the next?	☐ Regular Help	☐ Extra Help				
	y Superior Court employed	you in the past?  by Butte County Superior Co	viret?	☐ Yes ☐ No				
Have you previously worked			out:	□ Yes □ No				
If yes, what name:	Tor Butte County Superior	court under another name?	1 × 1 × 8					
Do you have any family member	ers currently employed by But	tte County Superior Court?	8 - 8	☐ Yes ☐ No				
8. Drivers License:	(State)	(Number)	(Class) (Ex	xpiration Date)				
o. Drivers License.	A 20 20 20 20 20 20 20 20 20 20 20 20 20		· Salaria A	8				
N S S S	- 10 P. A.			181				
9. Employment Eligibility Ven	rification: Can you, after en	nployment, submit verificatio	n of your legal right to					
States?	AND ARD	<b>一种</b>	1 222 1	│ □ Yes □ No				
10. Veteran's Preference Point	s: Are you applying for Vetera	n's Preference Points?		☐ Yes ☐ No				
		be attached at the time of submiss	sion of the application. Sul	UE				
final filing deadline will not be a	accepted.	11-0.1		Ä				
any arrest or detention that did not r any misdemeanor conviction for whi	esult in conviction, any conviction ich probation has been successfully	employment. Each case is considered for which the record has been judicity completed or otherwise discharged	ally ordered sealed, expunged	, or statutorily eradicated,				
for which a pretrial or post-trial dive Have you ever been convicted				□ Yes □ No				
		which your are currently out of	on bail or on your own re					
	of the above questions, atta	ch an additional sheet, and lis	t the date, the charge or					
state in which charged, and the				, ,				
12. Type of Work: What type all that apply.)	of work will you accept? Y	ou will only be considered fo	r the type of employmen	nt you check. (Check				
☐ Permanent / Regular-Help		ry / Extra Help						
☐ Full-Time		000000000000000000000000000000000000000						
13. Language Skills: Indicate l	anguages in which you poss	sess sufficient fluency to act a	s an interpreter.					
14. References: List at least references are preferable.	three people that are not	related to you and who can	provide a reference fo	r you. Professional				
Name	Address	Telephone	# Occupatio	Years				
TValle	Audicss	Теперионе	<i>н</i> Оссирано	Known				

			HIG	GH SCH								
Name and Location				Did You Graduate? Equiv					uivalency	ivalency Test or GED?		
				□ Yes □ No					□ Yes □ No			
				□ Yes □ No				□ Yes □ No				
	COLLEGE	, UNIVERS	SITY, BUSI	NESS, T	RADE, OI	R SERVI	ICE SCHOO	DLS				
Name and Location			Maj			nits Con			Degree		ates of	
Name and Location		Iviaj	01	Semester		Quarter	Earned		Attendance			
		0070717	· · · · · · · · · · · · · · · · · · ·	D. D. C. T.		orp.m.						
Organ	PROFE nization	SSIONAL I		<u>, REGIS</u> Number		, CERTI	IFICATION  Issue Date		Ev	piration	Date	
Olgai	iizatioii		-	Nullioei			Issue Date		EX	рпаног	Date	
16. Experience: Beginnir	ng with your most	recent expe	erience, giv	e detail o	on the expe	rience th	nat vou belie	ve mee	ets the reau	iiremen¹	ts for this	
recruitment. List all po												
Resumes may be attach						mpleted	Butte Coun	ty Sup	erior Cour	t applic	ation for	
employment. This section	on must be comp	leted even i	f attaching						1			
Employer:				Job Tit	le:				From (MM			
Address:				Superv	risor's Name	2 & Title			To (MM/DI		3.6 .1	
Addiess.				Superv	1501 5 1 (411)	c & Thic	•		Total: Hours per	Years Week:	Months	
Phone Number:	Number	Reason	for Leaving	<u>                                       </u>					Salary: \$		per	
Duties:	Supervised:											
Duties.												
				ı								
Employer:				Job Tit	le:				From (MM			
Address:				Supervisor's Name & Title:				To (MM/DI		3.6 .1		
Addiess.				Superv	1501 5 1 (411)	c & Thic	•		Total: Hours per	Years	Months	
Phone Number:	Number	Reason	for Leaving	:					Salary: \$		per	
Duties:	Supervised:											
24446.												
F 1				T 1 m	1				l p			
Employer:				Job Tit	ile:				From (MM			
Address:				Superv	isor's Name	e & Title	<u> </u>		To (MM/DI	Years	Months	
				~ wp ***			•		Hours per		Months	
Phone Number:	Number Supervised:	Reason	for Leaving	:					Salary: \$		per	
Duties:	Supervised.								1			
17. Certification: I here												
my knowledge. I ur consideration for empl												
herein. I further author	rized the reference	ces and emp	ployers list	ted abov	e or on an	y of the	attached do	cumer	nts to give	you an	y and all	
pertinent information damage that may result	concerning my p	orevious er	nployment	, person	al or othe	rwise.	I release a	II parti	ies from l	ıability	for any	
damage mai may result	i iroin turnisiiilg	miormatio	n to you.									
	Date						Signature o	f Annli	cant			
			_									
If you are submitting the co	ourt application on-	line you will	be required of	at time of	interview to	sign a de	eclaration to c	ertify th	hat all staten	nents ma	de on this	

If you are submitting the court application on-line you will be required at time of interview to sign a declaration to certify that all statements made on this application are complete and true to the best of your knowledge.